



Commissioner for Patents
Washington, DC 20231
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Bib Data Sheet

CONFIRMATION NO. 7814

SERIAL NUMBER 09/254,966	FILING DATE 03/16/1999 RULE	CLASS 424	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. MO-5092/LEA
APPLICANTS ROBERTO CORREA, LEVERKUSEN, GERMANY; HANS-ROBERT HEHNEN, SIEGBURG, GERMANY; EBERHARD PFAFF, SCHWAIGERN, GERMANY; ARMIN SAALMULLER, REUTLINGEN, GERMANY; THOMAS PAULY, NEU ISENBURG, GERMANY; BETTINA HOHLICH, TUBINGEN, GERMANY; BERNADETTE GLATTHAAR-SAALMULLER, REUTLINGEN, GERMANY; KARL-HEINZ WIESMULLER, TUBINGEN, GERMANY;				
** CONTINUING DATA ***** This application is a 371 of PCT/EP97/04866 09/08/1997				
** FOREIGN APPLICATIONS ***** GERMANY 196 38 044.8 09/18/1996				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after net <input checked="" type="checkbox"/> <i>allowance</i> Verified and <i>acknowledged</i> Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>		STATE OR COUNTRY GERMANY	SHEETS DRAWING	TOTAL CLAIMS 20 INDEPENDENT CLAIMS 1
ADDRESS BAYER CORPORATION 400 MORGAN LANE WEST HAVEN, CT 06516-4175				
TITLE IMMUNOGENIC PEPTIDES OF FOOT-AND-MOUTH DISEASE VIRUSES				
FILING FEE RECEIVED 978	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER 09/254,966	FILING DATE 03/16/99	CLASS 435	GROUP ART UNIT 1643	ATTORNEY DOCKET NO. MO-5092/LEA
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APPLICANT: ROBERTO CORREA, LEVERKUSEN, FED REP GERMANY; HANS-ROBERT HEHNEN, SIEGBURG, FED REP GERMANY; EBERHARD PFAFF, SCHWAIGERN, FED REP GERMANY; ARMIN SAALMULLER, REUTLINGEN, FED REP GERMANY; THOMAS PAULY, NEU ISENBURG, FED REP GERMANY; BETTINA HOHLICH, TUBINGEN, FED REP GERMANY; BERNADETTE GLATTHAAR-SAALMULLER, REUTLINGEN, FED REP GERMANY; KARL-HEINZ WIESMULLER, TUBINGEN, FED REP GERMANY.

*FMDV
= Aphthous fever virus*

CONTINUING DOMESTIC DATA***
VERIFIED

371 (NAT'L STAGE) DATA***
VERIFIED THIS APPLN IS A 371 OF PCT/EP97/04866 09/08/97

FOREIGN APPLICATIONS***
VERIFIED FED REP GERMANY 196 38 044.8 09/18/96

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/12/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS
BAYER CORPORATION
100 BAYER ROAD
PITTSBURGH PA 15205-9741

TITLE
IMMUNOGENIC PEPTIDES OF FOOT-AND-MOUTH DISEASE VIRUSES

FILING FEE RECEIVED \$894	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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SERIAL NUMBER 09/254,966	FILING DATE 03/16/99	CLASS 435	GROUP ART. NO. 1643	ATTORNEY DOCKET NO. MO-5092/LEA
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APPLICANT	<p>ROBERTO CORREA, LEVERKUSEN, FED REP GERMANY; HANS-ROBERT HEHNEN, SIEGBURG, FED REP GERMANY; EBERHARD PFAFF, SCHWAIGERN, FED REP GERMANY; ARMIN SAALMULLER, REUTLINGEN, FED REP GERMANY; THOMAS PAULY, NEU ISENBURG, FED REP GERMANY; BETTINA HOHLICH, TUBINGEN, FED REP GERMANY; BERNADETTE GLATTHAAR-SAALMULLER, REUTLINGEN, FED REP GERMANY; KARL-HEINZ WIESMULLER, TUBINGEN, FED REP GERMANY.</p> <p>**CONTINUING DOMESTIC DATA***** VERIFIED <u>W</u></p> <p>**371 (NAT'L STAGE) DATA***** VERIFIED THIS APPLN IS A 371 OF PCT/EP97/04866 09/08/97 <u>W</u></p> <p>**FOREIGN APPLICATIONS***** VERIFIED FED REP GERMANY: 196 38 044.8 09/18/96 <u>W</u></p> <p>IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/12/99</p>
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>W</u> <u>W</u> <div style="display: flex; justify-content: space-between; font-size: small;"> Examiner's Initials Initials </div>	STATE OR COUNTRY DEX	SHEETS DRAWING 0	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 1
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ADDRESS	BAYER CORPORATION 100 BAYER ROAD PITTSBURGH PA 15205-9741
TITLE	IMMUNOGENIC PEPTIDES OF FOOT-AND-MOUTH DISEASE VIRUSES

FILING FEE RECEIVED \$894	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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